SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of pelivery  42414  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
COLBY SANDERS ERIC LEWIS ZADOK VENTURES LLC PO BOX 681271 HOUSTON TX 77268	3. Service Type
TIOGOTON IX 17250	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
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PS Form 3811, July 2013 Domestic Beturn Receipt	

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NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For raluables, please consider Insured or Registered Mail.

For an additional fee, a *Return Receipt* may be requested to provide proof of lelivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the ee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS<sub>®</sub> postmark on your Certified Mail receipt is equired.

For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".

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PORTANT: Save this receipt and present it when making an inquiry.

Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047